



Cooperative Leadership Camp Application for Scholarship

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Parent or Guardian Name(s): _____

Parent or Guardian Phone(s): _____

Have you attended CLC before? YES NO

Are you or your family a current Co-op member? YES NO If yes, where? _____
 This can include Utility Co-ops, Credit Unions, and food Co-ops.

Education

High School: _____ Address: _____

Phone: _____

GPA: _____

Current Grade: _____ Age: _____

References

Please list two school or leadership references. Please do not use a family member or relative.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
E-mail: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
E-mail: _____

Leadership and Volunteer Roles

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Role: _____

Responsibilities: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Role: _____

Responsibilities: _____

Why should you be chosen to attend CLC?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to a spot at CLC, I understand that false or misleading information in my application may result in my spot being given to another applicant.

Signature: _____ Date: _____

Printed Name: _____

Signature of Parent or Guardian: _____ Date: _____

Printed Name: _____



When complete, return to either your Co-op or to CCNC at 323 W Jones Street #200, Raleigh, NC 27603. You will be notified if selected for the scholarship to attend Cooperative Leadership Camp. If selected, you will receive registration paperwork from CCNC to complete prior to CLC.